

AMENDED IN ASSEMBLY APRIL 12, 2005

AMENDED IN ASSEMBLY MARCH 31, 2005

CALIFORNIA LEGISLATURE—2005—06 REGULAR SESSION

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**ASSEMBLY BILL**

**No. 1179**

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**Introduced by Assembly Member Yee**

February 22, 2005

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An act to add Section 1507.25 to the Health and Safety Code, relating to community care facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 1179, as amended, Yee. Community care facilities: foster children: injections.

Existing law regulates the licensure of community care facilities by the State Department of Social Services and authorizes a community care facility to provide certain incidental medical services.

Existing law authorizes facility staff who are not licensed health care professionals to provide incidental medical services in a community care facility for adults if, among other things, they are trained by a licensed health care professional and supervised according to an individualized health care plan for clients which is prepared by a health care team and reassessed at least every 12 months or as more frequently determined by the client's physician or nurse practitioner.

This bill would authorize designated foster care providers to administer injections for diabetes and anaphylactic shock, or other prescribed medication, to a foster child, if the provider is trained to administer injections by a licensed health care professional. The bill would require the licensed health care professional to periodically

review, correct, or update this training as the health care professional deems necessary *and appropriate*.

Vote: majority. Appropriation: no. Fiscal committee: no.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. The Legislature finds and declares all of the  
2 following:

3 (a) The state has a duty to care for and protect the children ~~that~~  
4 the state places into foster care, and as a matter of public policy,  
5 the state assumes an obligation to ensure the health and safety of  
6 children in foster care.

7 (b) Anaphylaxis is a severe allergic reaction that involves the  
8 entire body. It can result in ~~difficulty in breathing~~ *breathing*  
9 *difficulty*, loss of consciousness, and even death if not  
10 immediately treated. Anaphylaxis is a medical emergency that  
11 requires immediate medical treatment. Severe anaphylactic shock  
12 can be reversed by use of an epinephrine autoinjector that  
13 delivers a single, pre-measured dose of epinephrine.

14 (c) Severe diabetic hypoglycemia is a life-threatening  
15 condition that can quickly lead to loss of consciousness, coma,  
16 and death. Severe diabetic hypoglycemia is a medical emergency  
17 that requires immediate medical treatment. Severe *diabetic*  
18 hypoglycemia can be reversed by an injection of glucogen.

19 (d) In the absence of trained medical personnel, relative  
20 caregivers or foster parents are often the only individuals in a  
21 position to provide emergency medical assistance to a foster  
22 child suffering anaphylaxis or severe diabetic hypoglycemia.

23 (e) It is the intent of the Legislature in enacting this act to  
24 authorize properly trained foster parents and relative caregivers  
25 to provide emergency medical services to foster children  
26 suffering from anaphylaxis or severe diabetic hypoglycemia, as  
27 well as other prescribed medication, under appropriate  
28 circumstances.

29 SEC. 2. Section 1507.25 is added to the Health and Safety  
30 Code, to read:

31 1507.25. (a) Notwithstanding any other provision of law, a  
32 relative caregiver, nonrelative extended family member,  
33 ~~specialized foster care home parent, certified caregiver of a foster~~

1 *family home parent, small family home parent, certified parent of*  
 2 *a foster family agency, or group home direct care staff member*  
 3 *who is not a licensed health care professional but who is trained*  
 4 *to administer injections by a licensed health care professional,*  
 5 *may provide emergency medical assistance to a child in his or*  
 6 *her care suffering from severe diabetic hypoglycemia or utilize*  
 7 *epinephrine autoinjectors to provide emergency medical aid to a*  
 8 *child in his or her care who is suffering from an anaphylactic*  
 9 *reaction.*

10 (b) A relative caregiver, nonrelative extended family member,  
 11 ~~specialized foster care home parent, certified caregiver of a foster~~  
 12 *family home parent, small family home parent, certified parent of*  
 13 *a foster family agency, or group home direct care staff member*  
 14 *who is not a licensed health care professional, but who is trained*  
 15 *by a licensed health care professional, and who has a child in his*  
 16 *or her care diagnosed with diabetes may inject the child with*  
 17 *insulin, as prescribed by the child's physician, and may provide*  
 18 *the necessary supportive activities related to the preparation and*  
 19 *administration of the insulin injection, including glucose testing*  
 20 *and monitoring.*

21 (c) A relative caregiver, nonrelative extended family member,  
 22 ~~specialized foster care home parent, certified caregiver of a foster~~  
 23 *family home parent, small family home parent, certified parent of*  
 24 *a foster family agency, or group home direct care staff member*  
 25 *who is not a licensed health care professional but who is trained*  
 26 *by a licensed health care professional and who has a child in his*  
 27 *or her care may inject the child a child subcutaneously with*  
 28 *medication as authorized and prescribed by the child's physician.*

29 (d) A licensed health care professional shall periodically  
 30 review, correct or update the training required by subdivision (a),  
 31 (b), or (c) with the foster child's caregiver as the *licensed* health  
 32 care professional deems necessary *and appropriate.*